

THE CITY OF EAST ORANGE

44 CITY HALL PLAZA • EAST ORANGE, NEW JERSEY 07018 www.eastorange-nj.gov

MAYOR, LESTER E. TAYLOR, III

Dwight Saunders Director

Lekisha Bondurant Rent Regulation Officer

DEPARTMENT OF PROPERTY MAINTENANCE & REVITALIZATION RENT CONTROL BOARD Tal. 072 266 5404 a 5404 052 220 2500

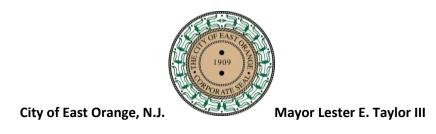
Tel: 973-266-5401 • FAX: 862 930-3580

Mike Galloway Chairperson

Cheryl Crawford Vice Chairperson

RENT CONTROL- 218-10 RENTAL INCREASE APPLICATION

LANDLORD INFORMATION: NAM	ЛЕ	
ADDRESS		
	CELL	
SUPERINTENDENT'S NAME		
TENANT'S NAME OR BUILDING A	ADDRESS	UNIT#
MONTHLY RENT	PROPOSED NEW RENT PER YEA	AR
DATE OF LAST RENT INCREASE_	EFFECTIVE DATE OF NEV	V INCREASE
PERCENTAGE AMOUNT OF NEW	INCREASE DOLLAR AMOUNT OF N	EW INCREASE
•	writing that you have complied fully with the Property Maintenance/Rent Conti	•
without the landlord's signature	n must be filled out completely. No a e, the correct application fee of \$5.00 a on with Property Maintenance/Rent Co	nd a copy of the letter advising
SIGNATURE	DATE	
ADDROVED	DIC ADDROVED	



Rent Control-218-10 RENTAL INCREASE APPLICATION CONTINUATION MULTIPLE RENTAL INCREASES WHOLE BUILDING ONLY

Current Tenant First name+ Last Name	Unit#	Monthly Rent Amount	Proposed New Rent Per Year	Date of Last Increase	Effective Date of New Increase	Percentage Amount Of New Increase	Dollar Amount Of New Increase
		-		-			

ATTACH THIS FORM TO 218-10 RENTAL INCREASE APPLICATION WHEN THERE IS MULTIPLE INCREASES

PER A WHOLE BUILDING